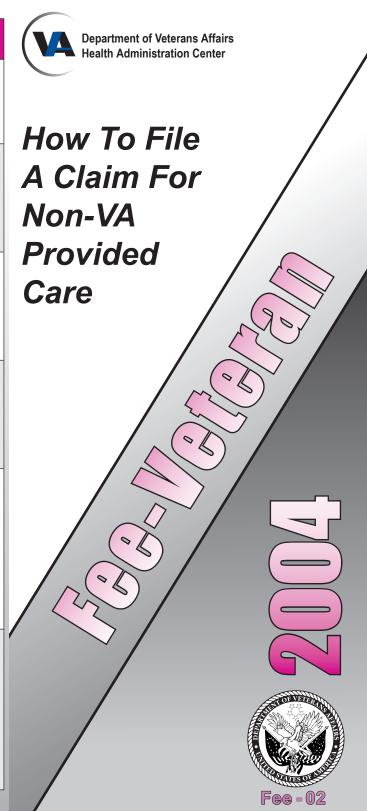
If the Care is:	And the service is:	Submit claim within:	Documents should include:
Preauthorized	Facility Charge (Inpatient and Outpatient)	30 days of patient discharge	-UB 92 and itemized statement of charges -Hospital Discharge Summary or Outpatient Treatment Records
Preauthorized	Physician Charge Other professional services (Inpatient or Outpatient)	30 days from date of outpatient care or discharge from inpatient hospital care	-CMS 1500 and itemized statement of charges - -Outpatient Hospital Emergency Treatment Records
Not Preauthorized	Emergency Medical Care Facility Charge (Inpatient and Outpatient)	As soon as possible but no later than 2 years from date of service	-UB 92 and itemized statement of charges -Hospital Discharge Summary or Outpatient Treatment Records -Completed VA Form 10-583
Not Preauthorized	Physician Charge Other professional services (Inpatient or Outpatient)	As soon as possible but no later than 2 years from date of service	-CMS 1500 and itemized statement of charges -Hospital Discharge Summary or Outpatient Treatment Records -Completed VA Form 10-583
Not Preauthorized – Millennium Bill	· · · · · · · · · · · · · · · · · · ·	90 days from determination of no other health care payer. Veteran is solely responsible for costs of health care	-UB 92 and itemized statement of charges -Hospital Discharge Summary or Outpatient Treatment Records -Certification of no other Payer for the services billed
Not Preauthorized – Millennium Bill	Physician Charge Other professional services (Inpatient or Outpatient)	90 days from determination of no other health care payer. Veteran is solely responsible for costs of health care	-CMS 1500 and itemized statement of charges -Hospital Discharge Summary or Outpatient Treatment Records -Certification of no other Payer for the services billed



Claim Filing Instructions

VA requires the following information on all claims submitted for payment for medical services provided to you:

- Full Name (include middle initial)
- Full Address (include zip code)
- Social Security Number
- Full name of Provider
- Completed CMS 1500 and/or UB-92 billing forms
- All other Health Insurance Information
- All claims for reimbursement directly to you or other individuals on your behalf must have, at a minimum, the claims information previously listed as well as all receipts (cash, check, credit card) that clearly acknowledge payment made for specific medical care and services claimed for you.

Claims for payments for your health care should be submitted to the Fee Department of the VA Facility that authorized payment of care in advance. If you are not sure if VA authorized payment of care in advance, you may submit health care claims to the nearest VA Medical Center Fee Department.

All Fee Dental care must be authorized in advance.

All claims for care delivered outside the US (except the Phillipines) are sent to:

VA Health Administration Center Foreign Medical Program PO Box 65021 Denver, CO 80206-9021 USA

or phone 303 331-7590 for further guidance.

Filing Information for Claims Not Preauthorized

All health care claims considered for services not preauthorized by VA will require additional information (claims for treatment of medical emergencies when you were not able to obtain treatment at VA facilities):

- VA Form 10-583 with information in Part 1 Blocks 1,2,3,4 and 5 completed by the claimant.
- You can obtain the VA Form 10-583 and additional information from the Fee Department at any VA Medical Center.
- Claims considered for payment under the Millennium Bill, "payer of last resort" require certification by the claimant that no other health

care payer exists for the specific claims being filed.

Claims Requiring Medical Documentation

Other medical documents may be required by the local VA facility to consider payment. The table provided (opposite) reflects the documents required. Your local VA Medical Center Fee Department will assist you in retrieving your medical documentation for VA use.

Filing Deadlines

VA Fee Basis programs have different claims filing deadlines depending on how the claim is being considered for payment. The table shows the timelines for those programs.

Please contact your local VA Medical Center Fee Department for additional information and assistance in filing claims for your health care services.

Your Local VA Medical Center Fee Department is located at: